

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below-named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first, and sole inventor (if only one name is listed below) or an original, first, and joint inventor (if multiple names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled Method and Apparatus for Refining Target Position and Size Estimates Using Image and Depth Data, the specification of which is being filed under the above-identified Attorney Docket Number.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

PRIORITY CLAIM

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

_____	_____	_____	____ Yes ____ No
(Number)	(Country)	(Day/Month/Year Filed)	(Priority Claimed)
_____	_____	_____	____ Yes ____ No
(Number)	(Country)	(Day/Month/Year Filed)	(Priority Claimed)

I hereby claim the benefit under Title 35, United States Code § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application.

_____	_____	_____	_____
(Application Serial No.)	(Filing Date)	(Status)	
			(patented, pending, abandoned)

_____	_____	_____	_____
(Application Serial No.)	(Filing Date)	(Status)	
			(patented, pending, abandoned)

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below:

PROVISIONAL APPLICATION NUMBER**FILING DATE****POWER OF ATTORNEY**

As a named inventor, I hereby appoint the following attorneys and/or agents of Sarnoff Corporation and Moser, Patterson & Sheridan, LLP to prosecute this application and transact all business in the Patent and Trademark Office having a Customer Number 28166 connected therewith:

I hereby direct that all correspondence and telephone calls in connection with this application be addressed to:

Moser, Patterson & Sheridan, LLP
595 Shrewsbury Avenue, Suite 100
Shrewsbury, NJ 07702
Tel.(732) 530-9404
Fax.(732) 530-9808

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURES

Full name of **first inventor**: John Richard Fields

Inventor's signature: John Richard Fields
Date: 7/14/03 Country of Citizenship: USA
Residence and Post Office Address: 137 South Mill Road
Princeton Jct., NJ 08550

Full name of **second inventor**: John Benjamin Southall

Inventor's signature: JB Southall
Date: 7/7/03 Country of Citizenship: UK
Residence and Post Office Address: 21 Walnut Street, Apt. 10 A.
Philadelphia, PA 19103

Full name of **third inventor**:

Inventor's signature: _____
Date: _____ Country of Citizenship: USA
Residence and Post Office Address: _____